Water Delivery Form.doc

vva	ter Delivery into	ormation	
Contra	ct No.:		
Name of Disaster:	Loa	Load Number:	
Delivery Order Number:			
Delivery Site Name and Ad	dress:		
Time-In: Date-In:			
Time-Out: Date-Out:			
Reason, if difference between	en time-in and time-	out exceeds four ho	ours:
Amazont Dalissaradı	lita na		n allata
Amount Delivered:	liters	cases	pallets
Amount Unloaded by Contractor, if any:			liters
Additional Ground Mileage,	if any:		miles
Transportation Carrier Nam	ne:		
Truck/Trailer/Vessel/Plane	ID #:		
Bill of Lading/Manifest No:			
Person Making Delivery: _			
Government Representat	ive at Delivery Site	:	
Signature:		Date:	
Print Name, Job Title, Emp	loyer:		